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ABSTRACT

Concerning the education of exceptional children in the Trust Territory of the Pacific Islands, the paper outlines the seven-step educational planning process utilized by the Special Education Division of the Trust Territory Department of Education. In initial planning phases the process is product oriented, not process oriented. Particular attention is paid to the first three steps of the planning process - identification, definition, and analysis of the problem - which are taken prior to formulation of possible solution models and selection of best solutions. The components of each phase are defined, and samples of problem analysis efforts, in diagram form, are included. Geographic and demographic information on the Trust Territory is presented, present services for handicapped children are listed, major problems to be resolved in developing programs are summarized, and the philosophy and goals of special education in the Trust Territory are stated. (KW)

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TRUST TERRITORY OF THE PACIFIC ISLANDS

Office of the High Commissioner

Saipan, Mariana Islands

February 3, 1971

PLANNING SPECIAL EDUCATION IN THE PACIFIC ISLANDS

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A report by Dr. Raymond H. Lehrman, Coordinator of Special Education, Department of Education, Trust Territory of the Pacific Islands, expecially for the Pan Pacific Conference on the Education of Exceptional Children, Honolulu, Hawaii, February 9-12, 1971.

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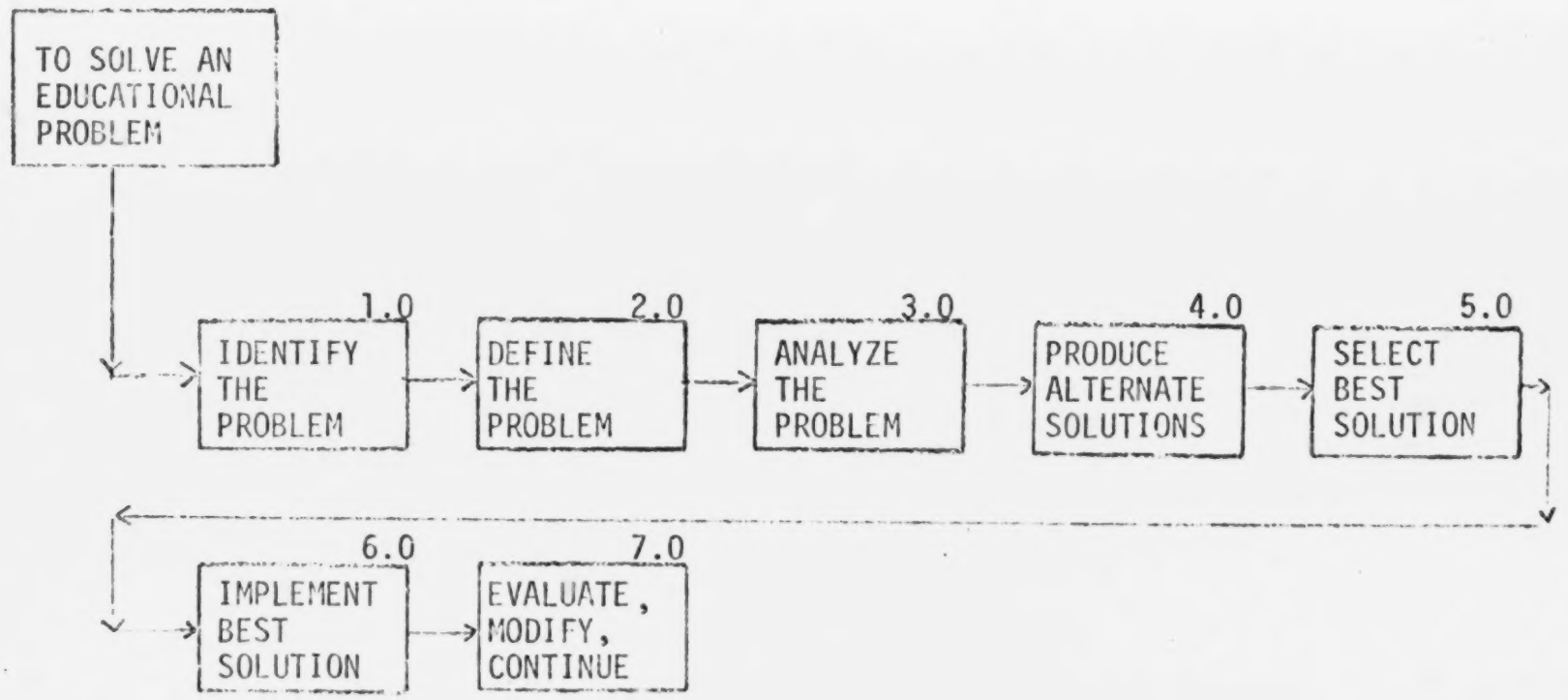
PLANNING SPECIAL EDUCATION IN THE PACIFIC ISLANDS

The Department of Education in the Trust Territory has adopted a planning and program approach for delivery of services for handicapped children (special education) which takes into consideration those factors and elements which are deemed to be most important. It is the purpose of this article to outline the selected pattern of planning steps and to pay particular attention to the first three components of the seven-step planning process diagrammed below:

A Seven-Step Educational Planning Process Diagram



The factors and elements deemed most important in planning programs of special education for handicapped children in the Trust Territory are:

1. Those social and cultural values, concerns, and characteristics of the different island peoples in Micronesia which significantly affect the acceptance and support of special education programs for handicapped children.

2. The physical-reality factors of demography, geography, transportation, and communication which must be taken into account as enablements or constraints in program implementation and delivery of services.

3. Administrative resource-reality factors such as funding limitations, availability of trained personnel and training facilities, enabling laws and regulations, and so on.

4. Knowledge about how children learn: Research, experience in other countries, etc.

Educational planners have always been faced with the impact of the above or similar variables. What has been lacking is a systematic program process which takes them into account in program planning, formulation and operation. All too often, programs are conceived and implemented with preconceived solutions in mind. Major emphasis is then placed upon the construction and operation of facility and the acquisition of staff without prior determination, definition, and elucidation of what such resources are intended to produce in terms of desired changes in the handicapped children who are, in fact, the ultimate targets of such effort. Such planning may be termed "process oriented."

Planning and program implementation based upon concern with process begins with an assumption that educational planners should determine the "best" ways of serving handicapped children on the bases of their own knowledge, experience, and inclinations. Such an assumption may result in the development of elaborately conceived, housed, staffed, and operated programs of special education which actually make little or no significant changes in the learning, growth, and the adaptive behaviors of the handicapped children whom the programs are designed to serve.

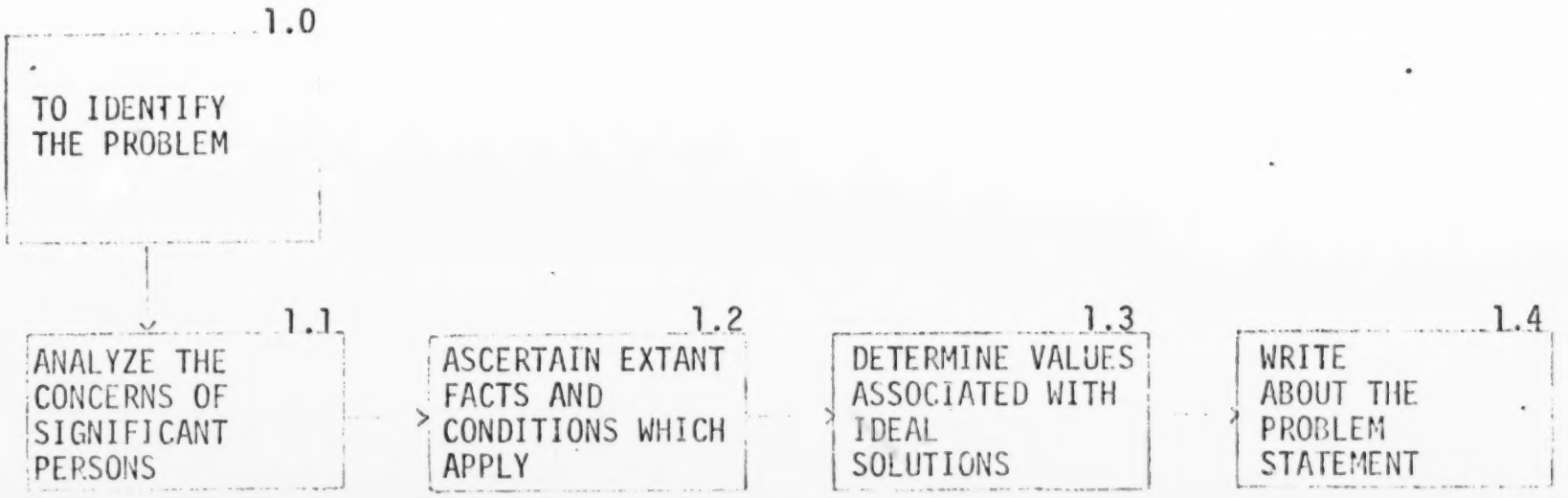
Often it is the case that the educators and allied specialists involved in a process-oriented planning effort discover that is is difficult to evaluate and document the benefits of the program because no one has ever spelled out

the objectives of the entire operation in terms of measurable changes in the children served.

The seven-step educational planning process utilized by the Special Education Division of the Trust Territory Department of Education postpones selection of solution models (such as establishment of special schools or classrooms) until thorough exploration of the problem has been made. It is product oriented, not process oriented, in initial planning phases. This is a crucial point of departure from traditional planning for the handicapped, which has assumed that the problem is that of finding ways to get handicapped children into special classrooms, special buildings, or special institutions. In the Trust Territory design, three important planning steps are taken prior to formulation of possible solution models and selection of best solutions.

The planning design calls for identification of the problem as the first step. The caution here is that many traditional planners begin with the assumption that the problem is already known; in fact, they are most often talking about a preconceived solution without ever having clearly identified the problem. In the Trust Territory's design, problem identification is based upon the concerns and values of those most closely associated with the planning topic - in this case, helping handicapped children - and upon the needs of such children as determined by the extant facts and the values expressed by those persons significant to the planning dimension, such as educators, parents, legislators, other professional persons, and community members.

Step 1.0 of the seven-step educational planning process is broken down as follows:



Problem identification is accomplished through meetings with Headquarters Department of Education Staff and District people in education, health services, parent groups, community government and agencies, and other interested persons. Achievement of problem identification involves dialog and exploration based upon four lines of questioning. A description of these lines of questioning serves to explain the thinking procedures associated with this first step of the planning method.

The first line of questioning seeks to elicit from significant persons their worries, statements of unmet needs, dissatisfactions, and concerns about the present and future conditions of handicapped children in the district, community, school, family, and home. The questions are posed in a variety of ways at different levels of abstraction to the significant persons described above. The result is a harvest of "concern statements" which are processed by the educational planners to reveal the dimensions of the present level of awareness, caring, and interest which the population may have expressed toward helping handicapped children. Application of the process to different groups and individuals and analysis of results tends to bring out commonalities of concern which appear more basic and strong than do isolate or less frequently

stated concerns. Sample concerns stated by Micronesians in the Trust Territory are: "Handicapped children cannot compete with other children in school." "The children laugh at him." "He cannot walk to school because of his crippled feet." "We have no facilities for audiometric or optometric testing," and so on.

The second line of questioning seeks to determine what is now being done or could be done for handicapped children under present resources. Associated with the previously gathered expressions of concern, statements of unmet needs, dissatisfactions, and anxieties, the planners attempt to uncover the facts of extant programs, policies, and resources in the form of facilities, funds, and people. Additional statements of lack of program and progress, inequable or inappropriate conditions, lack of facility and resource, are gathered. Sufficient assembly of the facts from a variety of sources enables the planners to identify significant misconceptions and lacks of information and awareness among key persons as well as to develop an overall picture of the status quo, important parts of the effort to identify the problem.

The third line of questioning leads directly from the preceding two questioning approaches. "What do you think we should be doing to help handicapped children?" The persons contacted are asked to describe "The way things ought to be" in the area of providing services for the handicapped. The resulting statements represent the values of significant persons insofar as helping the handicapped is concerned. "My crippled child should be given special help to get to school" represents a value statement by a Micronesian parent, as does "The school should teach him not to fight and run away; make him learn to read."

The procedures described above are based upon the planning concept that, for concerned individuals, a problem is "The difference between the way things are and the way things are desired to be."

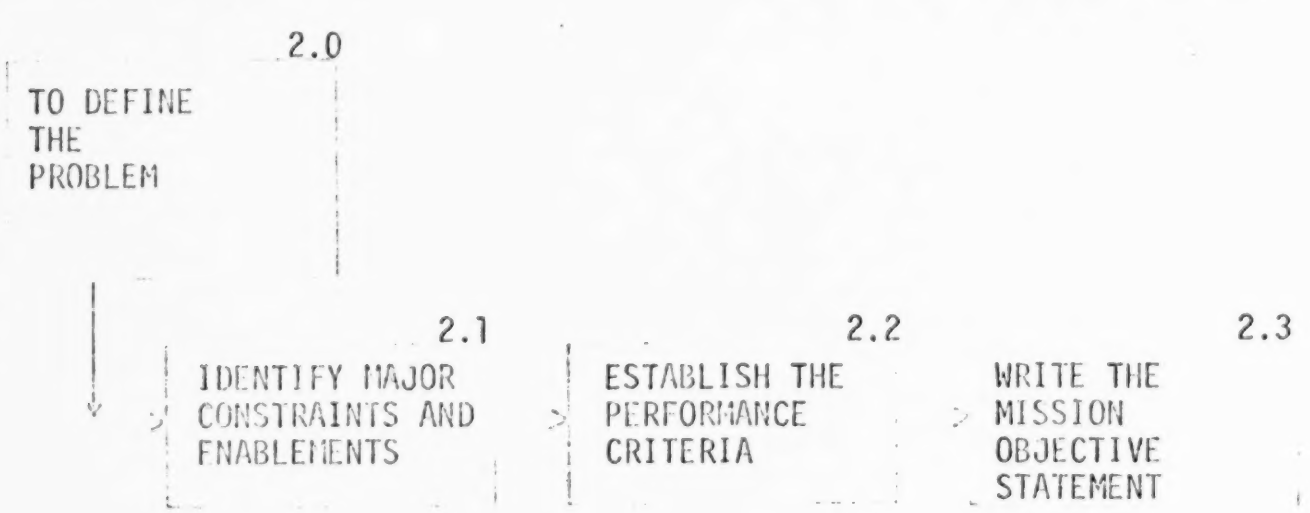
In the Trust Territory planning design, a problem is considered to have three basic elements: (1) a genuine and substantial dissatisfaction or concern on the part of significant people in a given life endeavor, e.g.; special education; (2) a statement or description of that population's values regarding the ideal conditions which would prevail if the concerns were alleviated; and (3) a noted discrepancy between "the way things are now" and "the way things ought to be."

The fourth line of questioning is, briefly, this: After study and analysis of the expressions of concerns and values by significant people, and after examining all facts appropriate to the problem area, what is the problem? In other words, what needs to be done that is not now being done? The carefully formulated and abstracted answer to this question becomes the "Problem Statement."

For the Special Education Division of the Department of Education, Trust Territory, the above procedures resulted in the following problem statement:

> "The problem is to assist handicapped children to attain optimal learning and growth toward effective adult living in Micronesia, in the basic areas of physical health, mental health, societal skills, academic skills, prevocational, and vocational skills."

Step 2.0 of the educational planning process is to <u>define the problem</u>. It is necessary to add to the idealized problem statement those reality factors which must be considered <u>before</u> we attempt solution designs. Step 2.0 contains the following elements:



In order to identify major constraints and enablements, answers to three basic lines of questioning are sought by the planning staff.

First, what are the physical-reality factors which must be taken into account as constraints? Useful headings under this line of exploration include questions about demography, geography, communication, transportation, and housing facilities.

Second, what socio-cultural factors must be recognized as constraints?

Third, what are the extant administrative resource factors which must be taken into account, either as constraints or enablements? These include funding sources and amounts, availability of trained personnel and personnel-training facilities and programs, enabling laws and regulations, as well as other pertinent resource data.

In following the given lines of questioning, the planners are taking a more professional and careful look at one problem dimension, "the way things are now". This is deemed important before a more thorough analysis of "the way things ought to be" (Step 3.0, Analyze the Problem) is accomplished.

A partially delineated list of major constraints and enablements is given to illustrate the results of this phase of planning effort in the Department of Education of the Trust Territory. The problem is to assist handicapped children to obtain optimal learning and growth toward effective adult living in Micronesia while recognizing the following major constraints and enablements:

I. Limiting Factors of Population Sparcity, Communication, Transportation, and Housing Facilities

   A. Population Sparcity

      1. Children in Micronesia number 55,938 out of a population of 102,250 persons (1970 U. N. report).

      2. The population is scattered on 196 islands among 3 million square miles of ocean.

3. Sixty-one percent of the child population lives in villages or towns on Disctrict (administrative) Center islands.

4. Thirty-nine percent of the child population lives on nearby, intermediate, or far distant islands, atolls, or islets, in relation to District Center islands.

B. Limitations in Communication Facilities

1. District Centers communicate with other District Centers through Headquarters, Saipan, by two-way radio, teletype, and radio telephone, and by airmail and surface (ship) mail.

2. District Centers communicate with outlying islands by surface mail via motor boat, field trip ship, and by two-way radio. Field trip ships visit outer islands on a limited schedule.

3. District Center islands communicate within island by telephone (limited), two-way radio, surface mail via car or truck (where roads exist) and by foot messenger or motor boat.

C. Limitations in Transportation Facilities

1. Between District Center islands, transportation of personnel and goods is via commercial airline, passenger or cargo vessel, and field trip vessel (shallow draft passenger-cargo vessel).

2. Between District Center and nearby islands, atolls, or islets, transportation is by motorboat. Field trip vessels go to outlying sites.

3. On island, transportation is by car, bus, and truck where roads exist and permit, by motor scooter, motor boat, ferry boat, and by walking.

D. Limitations in Housing Facilities.

1. High school classroom facilities can provide for 68% of graduating elementary pupils.

2. Staff housing on appropriate sites is markedly limited.

II. Limiting Socio-Cultural Factors.

A. Provision of special medical treatment and special education to improve the learning performance of handicapped children is a concept just being introduced to the people of Micronesia.

B. Mildly handicapped children are most often unnoticed and unidentified, both within the school and within the village and family life.

C. Moderately and severely handicapped children often do not attend school because of adult and peer attitudes.

D. These customs and attitudes appear to be inversely related to the availability of information about and services for handicapped children.

E. Ten major languages, plus dialectic variants, are spoken in the six districts.

III. Limiting Administrative-Resource Factors (Enablements)

A. The Trust Territory Budget for the Department of Education does not currently provide any funds for the education of handicapped children.

B. Federal Grant-in-Aid Programs from the U. S. Office of Education now provide approximately $172,000 per year for programs for the handicapped, including funds for training of professional personnel.

C. A teacher-training program which began in September, 1970, at Community College of Micronesia, is now training 50 students per year to teach mildly handicapped children in all areas of handicap.

D. One program for ten young deaf children is in operation in the Marianas District. Although numbers of deaf children are not known, it is believed that as much as 1% of the child population may have a severe to profound hearing loss.

E. At present there are no legal provisions in the educational code which facilitate or regulate special education for handicapped children.

F. Past levels of diagnostic and casefinding services have not provided enough data to establish reliable incidence figures of percentages of children who may be handicapped.

It is helpful at this point to establish three additional constraint assumptions although they are based upon projections rather than fact. The assumptions concern (1) time, (2) personnel, and (3) funding. In planning for special education programs in the Trust Territory of the Pacific Islands, it is assumed that (a) planning will be based on a five-year period and advanced annually, (b) there will be an annual increase of 50 trained teachers of the handicapped and two special-education teacher trainers per year, and (c) the funding level will increase 5% per year until 1976. These assumptions add a stable set of reference points to the planning activity. They are believed to

be generally realistic and can be adjusted easily as the five-year plan unfolds annually.

The original problem statement can now be rephrased as a question, which should be prefaced by introduction of the limiting reality factors just outlined. The problem question for the Trust Territory is:

> "Given that significant limitations exist in transportation, communication, and housing facilities; that socio-cultural and language variants must be considered; and given that there are limited administrative resources available; within the next five years, how can we best assist handicapped children to attain optimal learning and growth toward effective adult living in Micronesia?"

A second component must now be added to the Problem Definition process, that of adding performance criteria held to be both realistic and desirable. Realism is obtained by reference to the reality-factors previously developed. Desirability is sought through (1) referral to the value statements and ideals previously developed and (2) by application of professional educational standards and criteria held by the Department of Education and the planning staff. Because the performance criteria furnish additional information for consideration when problem solution models are considered, these criteria are established prior to efforts to develop problem solutions. The planning question now asked: What are the performance requirements which would indicate a most satisfactory solution?

For the Trust Territory, the following performance criteria have been tenatively established, prior to determination of possible problem solutions:

> A desirable special education program for the Trust Territory must, within the next five years:
>
> 1. Provide special education for mildly handicapped children within the regular classroom insofar as possible.
> 2. Provide special education for at least 625 handicapped children a year by 1976.
> 3. Aid at least 100 moderately handicapped children each year by 1976.

4. Provide special education for at least 50 severely handicapped children per year by 1976.

5. Teachers of the handicapped will have a minimum of two semesters of college training in special education of handicapped and a minimum of 250 trained teachers will be in the schools.

6. Be based upon the values developed by the people of Micronesia and upon their interests and concerns, as reflected by enabling legislature passed by the Congress of Micronesia by 1976.

7. Be funded at least 33 1/3% by the Trust Territory budget, rather than the present 100% funding by U. S. Grant-in-Aid funds.

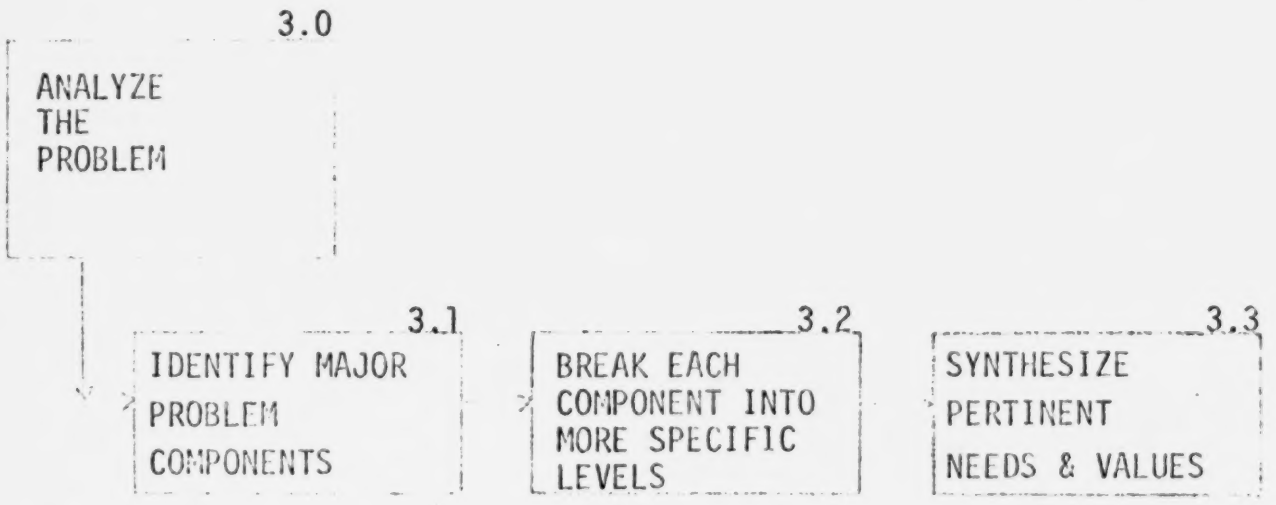
8. Be based upon the formulation of measurable objectives stated in behavioral terms in areas of academic achievement, social behaviors, physical health, and prevocational-vocational skills.

The final step in Defining the Problem is the welding of the previous steps into a composite whole which is labeled a Mission Objective Statement. The Mission Objective Statement contains the problem statement, the major constraints and enablements, and the performance criteria. Written in paragraph format, the Mission Objective Statement contains in general terms the essence of the identified and defined problem. The problem has now been studied to the degree that it has become a mission i.e.; a determination to solve the identified problem within defined limits has emerged from the planning process. The Mission Objective Statement for the proposed special education program of the Trust Territory Department of Education is as follows:

> "The mission is to assist handicapped children to attain optimal learning and growth toward effective adult living in Micronesia in the basic areas of physical health, mental health, societal skills, academic skills, and prevocational-vocational skills.
>
> The program must take into realistic consideration the extant limiting factors of population sparcity, communication, transportation and housing facilities; the socio-cultural limitations of differing languages, customs, and attitudes toward handicapped children, and the limitations existing in administrative resource areas, including a planning time factor of five years, an annual assumed increase of trained special education teachers not to exceed 50 new teachers per year, and a projected budget increase of not more than $3,600 per year through 1976.

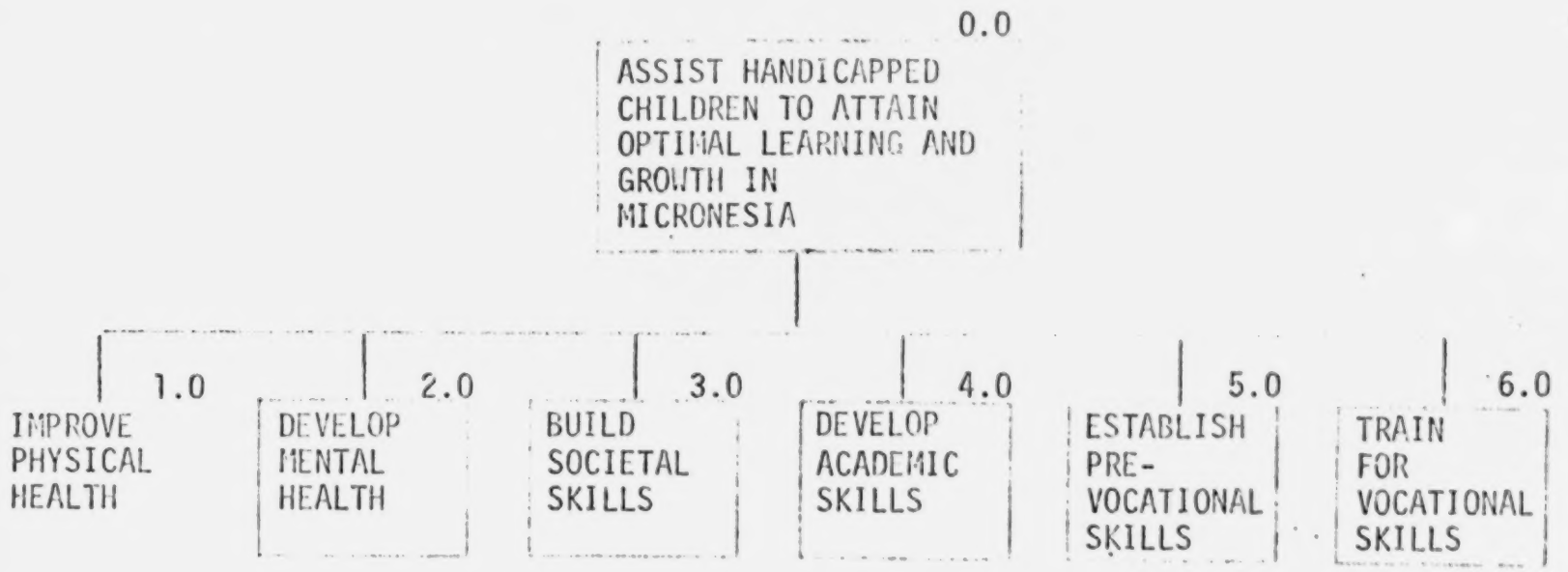
> The desired problem solutions must, by the end of 1976, provide special education for at least 625 mildly handicapped children per year within regular classrooms, aid at least 100 moderately handicapped and 50 severely handicapped children per year, under the teaching effort of teachers with at least two semesters of college training in special education for the handicapped. The program must be in accordance with the values, interests, and concerns of the people of Micronesia, as reflected in enabling legislature passed by the Congress of Micronesia by 1976 in support of such programs. Such support shall include provision for special education programs at not less than 33 1/3% support level from the Trust Territory Budget. The program must be stated in terms of measurable objectives based upon learning and growth activities of the target population of handicapped children and demonstrate a mean rate of 10% annual increment toward such goals."

Step 3.0 of the seven-step planning process is to Analyze the Problem. A thorough analysis of "the way things ought to be" causes the planners to more thoroughly determine and describe the desired end goals. The planning axiom is: The more clearly the planners have described the ideal final situation, the easier will be the task in devising methods of moving toward that situation (developing solutions to the problem). Therefore, the problem is analyzed as envisioned when ideally solved. Step 3.0 is diagrammed as follows:



Achievement of Problem Analysis involves following a line of questioning which asks, in terms of previously established concerns and values, "What will the problem situation be like when ideally solved?" In other words, "What would

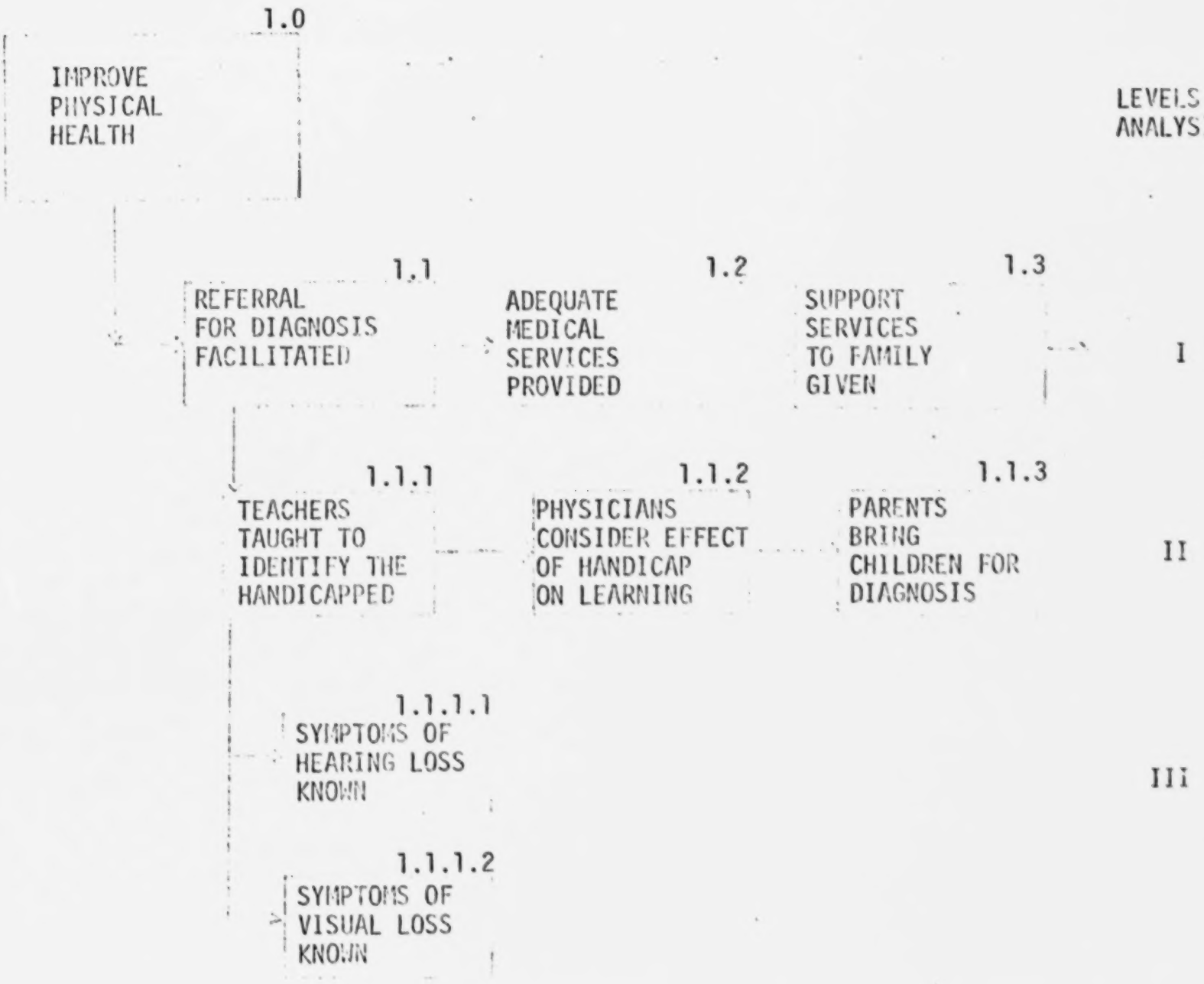
a special education program in the Trust Territory be like, if it were successfully assisting handicapped shildren to attain optimal learning and growth toward effective adult living in Micronesia in the basic areas of physical and mental health, societal skills, academic skills, prevocational and vocational skills?" Development of more specific aspects of the problem statement must now be done. We can illustrate by partial analysis of the Problem Statement of the Trust Territory in diagram form.



The planning task is to analyze each of the five major components, as given, into succeeding levels of specificity. As many levels as necessary (usually three) are developed by the planners.

(Note: It is not necessary to use the box-and-line diagram form shown here. Planning ideas can also be communicated in outline form, in sentences and paragraphs, or by other techniques. The use of box-and-line diagrams has been found helpful by many in presenting overall ideas in compact form, in presenting time sequences, or relationships.

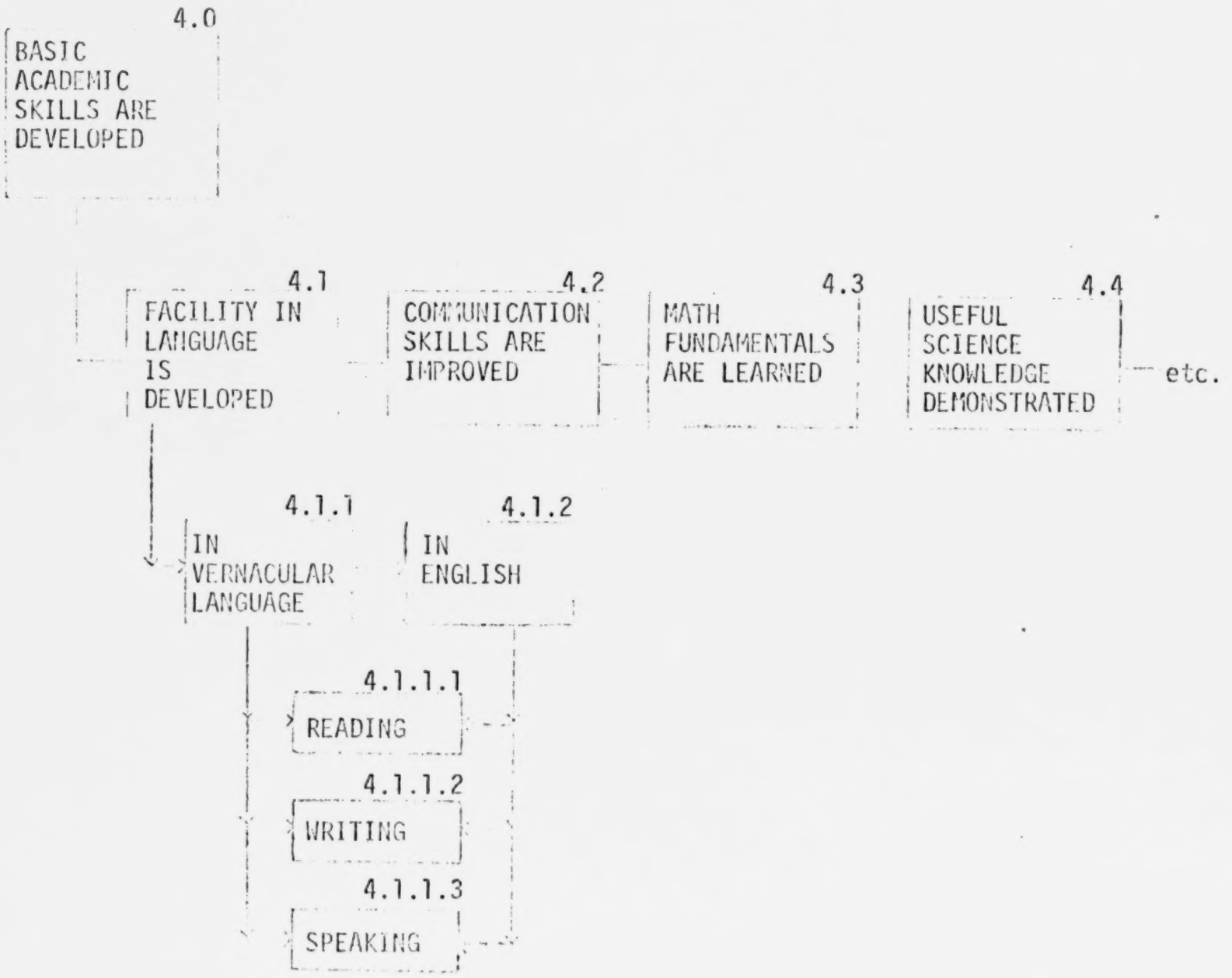
A sample of the Trust Territory's problem analysis effort is shown here, with analysis diagrammed to the third level of specificity.



From the above diagram, which is only partially complete, it may be seen how the analysis goes from the general to the specific and may be carried as far into specificity as is desired. The use of a numbering system makes it possible to maintain identification of the individual pieces of an analysis as they refer to more generalized components above them or to the more detailed and specific

bits into which they are broken. In the example above, sections 1.1, 1.2, and 1.3 could each be analyzed in detail on separate pages. Although analysis of a problem which contains a number of basic elements could cover an entire wall of box-and-line diagrams containing the analytic breakdown of each element into more specific levels, the major aspects of the problem can be represented on a single page.

A second sample follows and represents a portion of the analysis of the problem component, Develop Academic Skills (for handicapped children).



From the above samples, the reader is asked to envision a complete analysis of the problem originally presented, "Assist handicapped children to attain optimal

learning and growth toward effective adult living in Micronesia in the basic areas of physical health, mental health, societal skills, academic skills, prevocational and vocational skills."

Completion of Step 3.0 has moved the planners significantly closer toward the development of possible solutions to the problem, which could be described as "finding ways to answer the Problem Question, '<u>How can we</u> assist handicapped children to attain optimal learning and growth. . . . ?'" However, it is not within the scope of this paper to detail Step 4.0 and the remainder of the seven-step planning process.

Emphasis has herein been placed on the first three steps of the planning design, Problem Identification, Problem Definition, and Problem Analysis. If these steps are thoroughly completed, prior to development of solutions, the final solution selected is most apt to:

1. Be realistically related to the needs, values, and concerns of significant people and handicapped children who are involved in the special education program.

2. Take into consideration all important constraints and enabling factors which could affect the success of the solution's implementation.

3. Be easily communicated to others because of the careful planning analysis which has been done.

4. Have clearly specified program goals which will enable the planners and educators to answer rather confidently the questions: What is your plan for special education? What are you trying to accomplish in your program?

5. Have clearly specified program criteria which will make it possible to measure degrees of progress toward identified goals.

6. Provide information useful in decision making concerning budget allocations and appropriations.

A review of the efforts described in this paper serves to affirm the statement that, for this educational planning model, "<u>A problem clearly identified, defined, and analyzed is a problem well on its way toward being solved.</u>"

Further information concerning systematic analysis and planning of programs for handicapped children in the Trust Territory of the Pacific Islands may be obtained by contacting the author.

Special Education
Department of Education

The Trust Territory of the Pacific Islands is a territory approximately the size of the United States. It lies in that portion of the Western Pacific Ocean which could be described as north of New Guinea, east of the Phillipines, and south of Japan, and ranges from about 1 degree to 22 degrees north latitude and 130 degrees to 172 degrees east longitude. An estimate of the size of The Trust Territory may be made by comparing this outline of the United States (TRANSPARENCY #1) with an overlay of The Trust Territory of the Pacific Islands (TRANSPARENCY #2 OVERLAY).

The legal status of the Territory is defined by a trusteeship agreement between the United States and the United Nations Security Council which entered into force on July 18, 1947, under which the United States administers the Territory.

The Trust Territory presents a distinct challenge to any agencies who endeavor to develop programs of direct service to handicapped children. Let us examine some of the parameters of this challenge:

First, a consideration of geography and demography: The map which you see represents artificial boundaries drawn over vast ocean spaces. The Trust territory's boundaries cover some 3 million square miles of ocean. Within these bounds lie more than 2,000 islands, islets, and atolls, lying in 3 major archipelagoes, the Carolines, the Marshalls, and the Marianas. The entire area is called Micronesia, or the "Tiny Islands." Guam in the Marianas and the Gilbert Islands south of the Marshalls, however, are not part of The Trust Territory.

The entire population of the Trust Territory is approximately 102,250 persons. This population resides on 196 inhabited islands, islets, and atolls whose total land area is estimated at 699 square miles. Most islands in the Eastern Carolines and the Marshalls are of coral formation. Remnants of a vast undersea volcanic ridge, stretching southward from Japan along the western perimiter of the Territory from the Mariana and Western Caroline Islands. The Eastern Carolines and all of the Marshall Islands rest on another series of submarine elevations. Elevation of the Territory's islands ranges from about 6 feet on a coral atoll to the 3,166 feet of Agrihan Island in the Marianas.

The Trust Territory of the Pacific Islands is divided into six administrative districts (TRANSPARENCY #3 OVERLAY). Within these districts is distributed the total population of approximately 102,250 inhabitants. Of this population, 54.7% are children under age 20.

The distribution of this child population among the six administrative districts is shown on the next slide (TRANSPARENCY #4 OVERLAY).

The island or atoll designated as the site of all district administrative functions contains the largest child population of that district. However, each district also encompasses other nearby islands or atolls and more distant islands and atolls, some of which are several hundred miles from the administrative center island.

An estimated 61% of the children in the Trust Territory live on district center islands or atolls. Each district center possess an airfield which is approved and used for regularly scheduled air passenger and cargo transportation. Cargo and passenger ships, both large and small, may also be scheduled to visit district center islands.

The 39% of the child population who live outside district center islands are widely scattered. Transportation is by motor boat to nearby locations and by field ship (shallow draft cargo and passenger vessels) to more distant locations. A newly established small aircraft amphibious passenger and cargo service promises some relief in the Marshall Islands.

In addition to geographic and demographic factors, any educational endeavor must recognize major elements of socio-cultural variance. Ten major languages, with dialectic variations, are spoken as native languages by the children of the Trust Territory. English is the language of instruction in the schools, wherever qualified teachers are available. The Department of Education places high priority on the training of Micronesian teachers to teaching English as a second language. At the same time, a concerted orthographic effort is being made to develop each child's own language.

Variance in family, custom, tradition, and life styles exists in significant degree in different locations throughout the Trust Territory.

With regard to health services, the Trust Territory is part of the Western Pacific Region of the World Health Organization (WHO). Te Department of Health Services uses standards of the WHO in such areas as communicable disease reporting and quarantine regulations. Children receive routine pediatric care in district center hospitals. Crippled children whose parents desire their treatment are referred to Crippled Children's Services, Department of Public Health, Guam, U.S.A. or Hawaii. Currently the Trust Territory is attempting to obtain its own funds from the U. S. Government for Crippled Children's Services. Insofar as diagnostic and clinical treatment of handicapped children, the Trust Territory offers limited services. Eye refractions can be given in four districts by resident doctors, who must travel to the other two districts to perform such services. Otological and audiological evaluation and diagnosis is not routinely available in the Trust Territory. Psychiatric and clinical psychological evaluation and treatment is available only from staff of the Headquarters Department of Health Services, located on the Island of Saipan, and expansion in this demension is projected.

There are no certified school psychologists or speech and hearing therapists employed in the Trust Territory.

One physical therapist is employed in the Rehabilitation Center on the island of Majuro in the Marshall Islands. This Rehabilitation Center does provide medical services, including physical therapy and prostheses, for crippled children and adults. Currently, three handicapped children are served in residence at the Rehabilitation Center, plus out patient services. These children attend a nearby parochial school in regular classrooms.

We have talked of parameters and limitations, ending on a positive note, that of a Rehabilitation Center which provides some servics for crippled children in a hospital setting. Now it is time to continue by listing present services for handicapped children and youth. We have one public school program for preschool deaf children in operation on the island of Saipan, Marianas District. This school serves ten children. Over the past ten years we have sent an estimated two dozen moderately and severely handicapped children to Hawaii for treatment and schooling. We have sent more than 300 children to Crippled children's Services on the Island of Guam for diagnosis and treatment. However, it must be pointed out that we are describing medical treatment, not special education for the handicapped. We emphasize the strong tie between the Department of Health Services and the Department of Education, both at Headquarters and District levels. And so we must conclude this portion of our presentation by repeating an earlier statement. "The Trust Territory presents a distinct challenge to any agencies who endeavor to develop programs of direct services to handicapped children."

A Summary of Major Problems to be Resolved in Developing Programs for Handicapped Children in the Trust Territory is given next. Above the problems in sparcity of population, distance, and difficulty with transportation and communication previously cited, we see five major problems to be resolved. There is a need for: (TRANSPARENCY: LIST)

1. Development of a Territory-wide awareness of the existence, needs and characteristics of handicapped children, together with

2. Development of knowledge and understanding of special education models and program efforts to assist handicapped children to obtain optimum learning and growth.

3. There is a need for initiation of programs of direct and related services for handicapped children in all administrative districts of the Trust Territory.

4. Concommitantly, there is a need to develop cooperation and support components in district departments of education and departments of health services in order to insure optimum effectiveness of programs and projects.

5. Finally, there is a need to develop trained Micronesian teachers and other professional personnel who can and will inititate, conduct, expand, and improve special education programs for handicapped children in the Trust Territory.

Philosophy and Goals for Special Education

The goals of special education in the Trust Territory are these:
TO ASSIST HANDICAPPED CHILDREN TO ATTAIN OPTIMAL LEARNING AND GROWTH TOWARD EFFECTIVE ADULT LIVING IN MICRONESIA IN DIMENSIONS OF

1. Physical Health

2. Mental Health

3. Societal Living

4. Academic Ability

5. Vocational Knowledge & Skills

The Department of Education, Trust Territory of the Pacific Islands, has developed the philosophy that, for the Trust Territory, mildly handicapped children are best (most logically, practically, and usefully) served in the regular classrooms of the schools, in company with non-handicapped children The following definition of special education has been established by the Department of Education:

> SPECIAL EDUCATION CONSISTS, IN PART, OF THE EFFORT OF TRAINED AND KNOWLEDGEABLE TEACHERS TO UTILIZE SPECIAL TECHNIQUES, ARRANGEMENTS, INTERVENTIONS, AND CONSEQUENCES TO SOLVE TEACHING-LEARNING PROBLEMS PRESENTED BY HANDICAPPED CHILDREN IN THE REGULAR CLASSROOM AS A DIRECT OR RELATED CONSEQUENCE OF THEIR HANDICAP(S).
>
> SPECIAL EDUCATION IS FURTHER DEFINED AS PROVISION OF THOSE SPECIAL FAVILITIES, TECHNIQUES, ARRANGEMENTS, INTERVENTIONS, AND CONSEQUENCES WHICH ARE NECESSARY TO SOLVE TEACHING-LEARNING PROBLEMS PRESENTED BY HANDICAPPED CHILDREN WHOSE DEGREE OF HANDICAP AND DISABILITY CAUSES THEM TO BE UNABLE TO BENEFIT FROM INSTRUCTION WITHIN THE REGULAR CLASSROOM DESPITE THE PRESENCE OF A TEACHER WHO IS SPECIALLY TRAINED TO TEACH HANDICAPPED CHILDREN. (TRANSPARENCY)

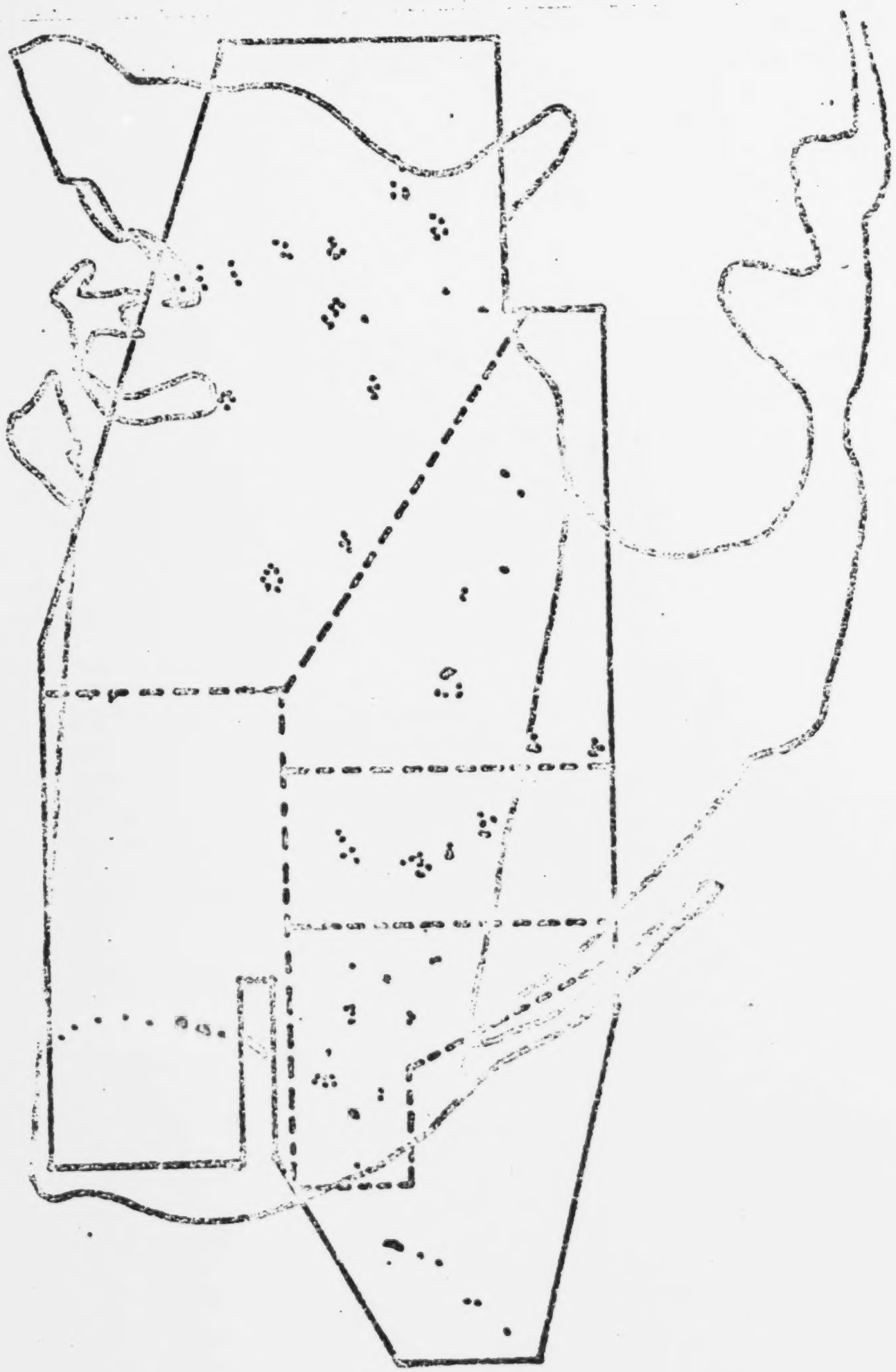
In keeping with the stated philosophy and definition, a major effort has been launched by The Trust Territory to train teachers to recognize and deal with special teaching-learning problems presented by handicapped children in the regular classroom.

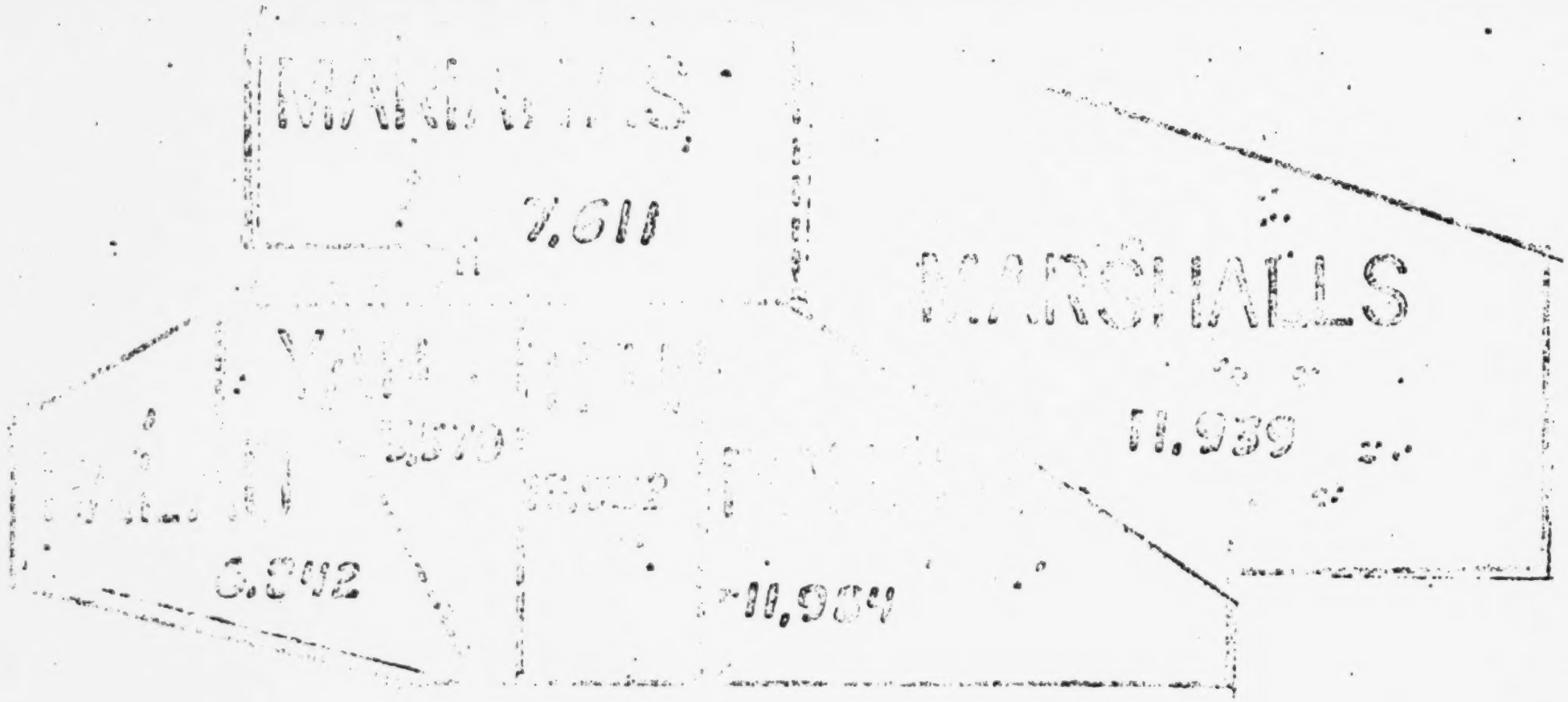
All teachers currently in training at the Community College of Micronesia, Ponape District, are being trained in delivering special education to handicapped children in the regular classroom.

In addition, this Special Education component of teacher training has been extended to the district education centers by means of two-week workshops covering the basic premises of the special education teaching method. This program is carried out by means from funds from Title III, Elementary and Secondary Education Act, United States Office of Education, United States Department of Health, Education, and Welfare.

There are two addition sources of funds presently available to the Trust Territory in providing special education for handicapped children. Both are based under Public Law 91-230, the Education of the Handicapped Act. Title VI, Part B, provides funds for direct services to handicapped children. Part D provides funds for training professional personnel to work in education of the handicapped.

For fiscal year 1971, funds under Part B ($75,000) are being used to (1) employ the Trust Territory's first qualified administrator of special education programs, plus his travel and secretarial help, and (2) to develop program patterns for direct services to handicapped children within those districts of the Trust Territory which presently have the need recognition and capability to initiate such programs. A brief description of proposed program models follows: (TRANSPARENCIES). At this stage of program development we are implementing a Resource Room Model Program for Visually Handicapped in Ponape District, and planning to implement an Itinerant Special Education Teacher Model Program for Truk District. The Dayschool Program Model for deaf children is continuing in the Marianas District. Plans are being made to continue program development throughout The Trust Territory.





24

Total Children: 55,939

Trust Territory of the Pacific Islands

TRUST TERRITORY OF THE PACIFIC ISLANDS

Major Program Efforts

1. Develop awareness of existence, needs, and characteristics of handicapped children
2. Develop knowledge and understanding of special education models and programs
3. Initiate programs of direct and related service for handicapped children in all 6 districts in the Trust Territory
4. Develop cooperation and support components in District Departments of Health and Education
5. Develop trained Micronesian teachers and other professional personnel to initiate, conduct, expand, and improve special education programs for handicapped children in the Trust Territory of the Pacific Islands

Goals for Special Education
TRUST TERRITORY OF THE PACIFIC ISLANDS

To assist handicapped children to attain optimal learning and growth toward effective adult living in Micronesia in dimensions of:

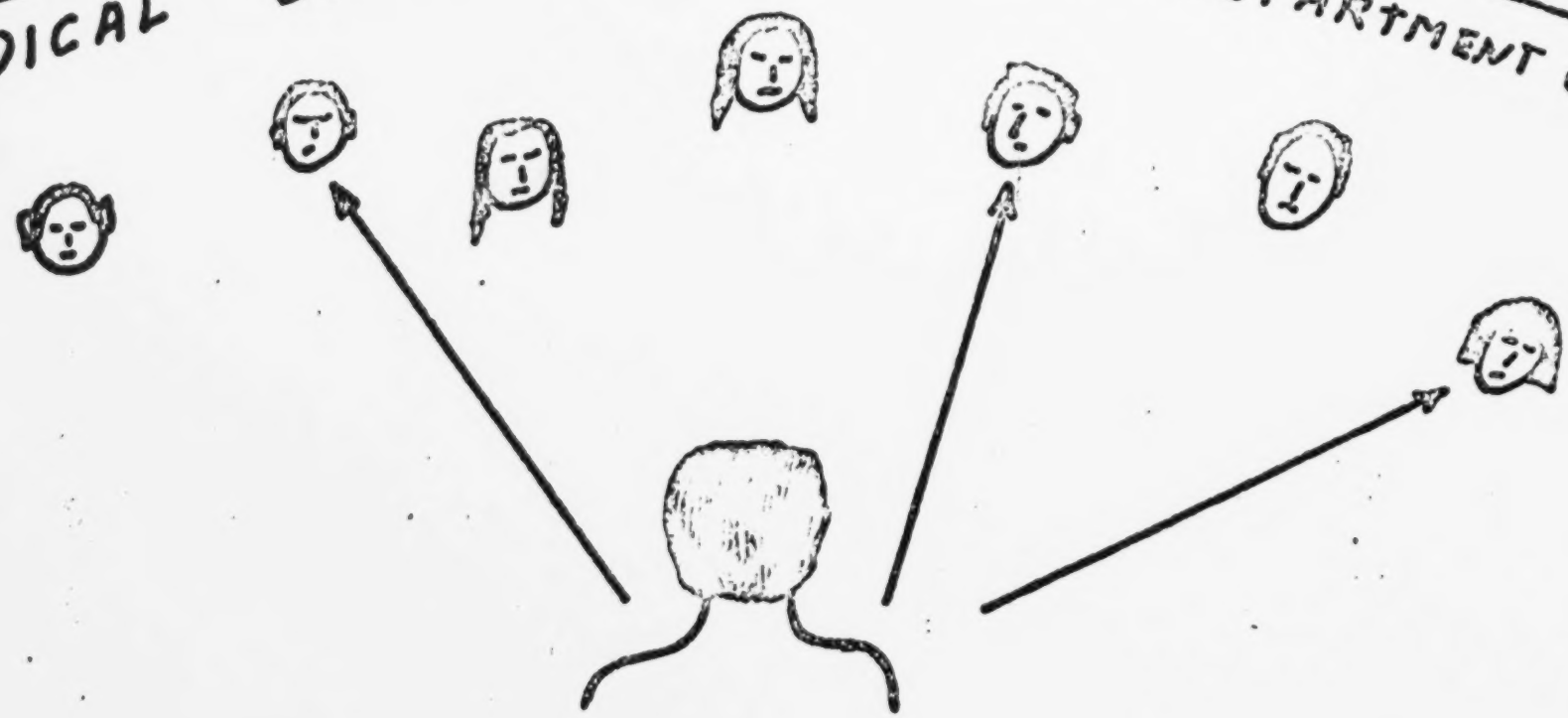
1. Physical Health
2. Mental Health
3. Societal Living
4. Academic Ability
5. Vocational Knowledge and Skills

Special Education Model #1

Trust Territory of the Pacific Islands

SERVICES IN THE REGULAR CLASSROOM

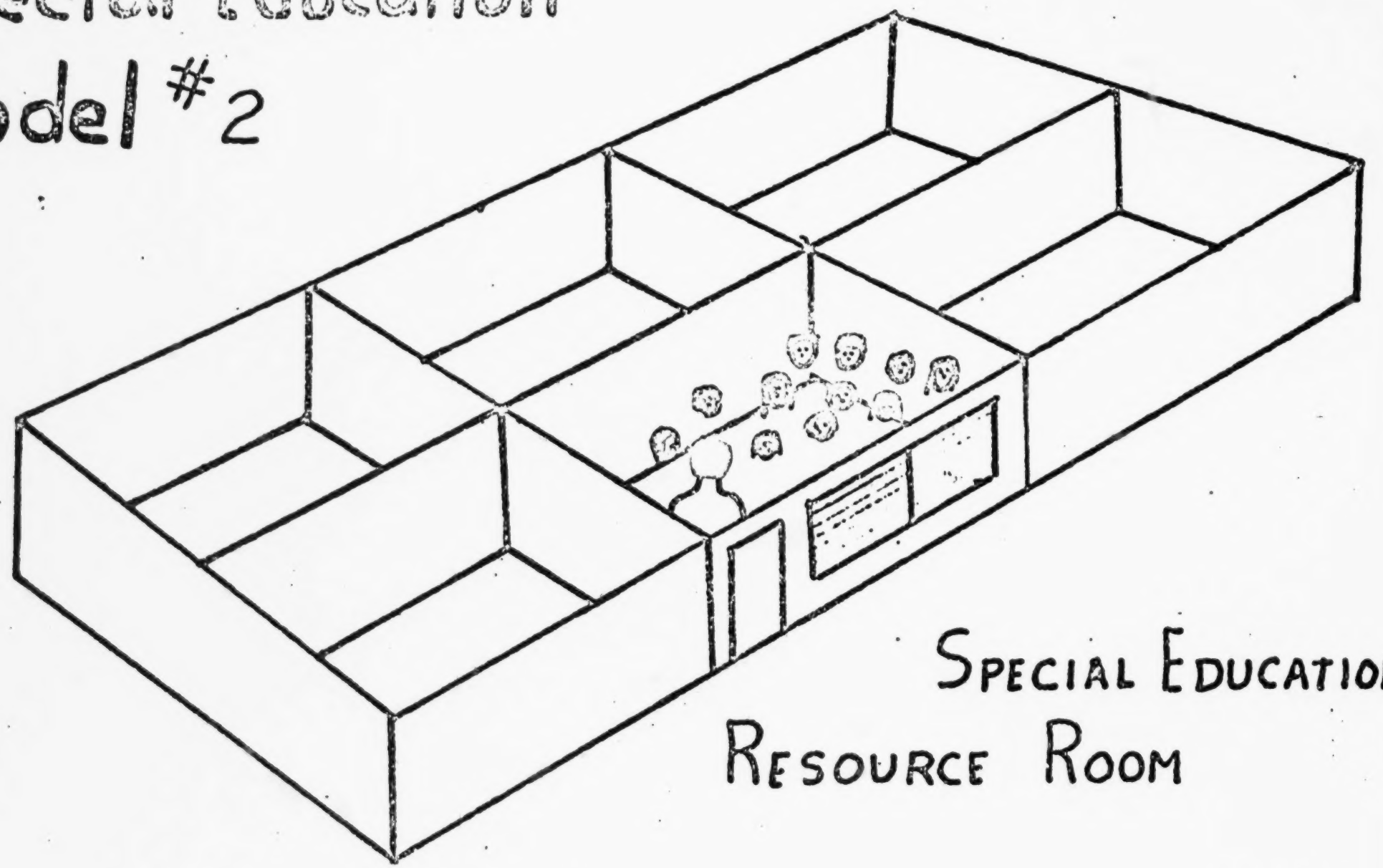
MEDICAL BACKUP VIA REFERRAL TO DEPARTMENT OF HEALTH SERVICES



SPECIAL TRAINING ENABLES CLASSROOM TEACHER TO SOLVE THE TEACHING-LEARNING PROBLEMS OF MILDLY HANDICAPPED CHILDREN IN THE REGULAR CLASSROOM SETTING

Special Education

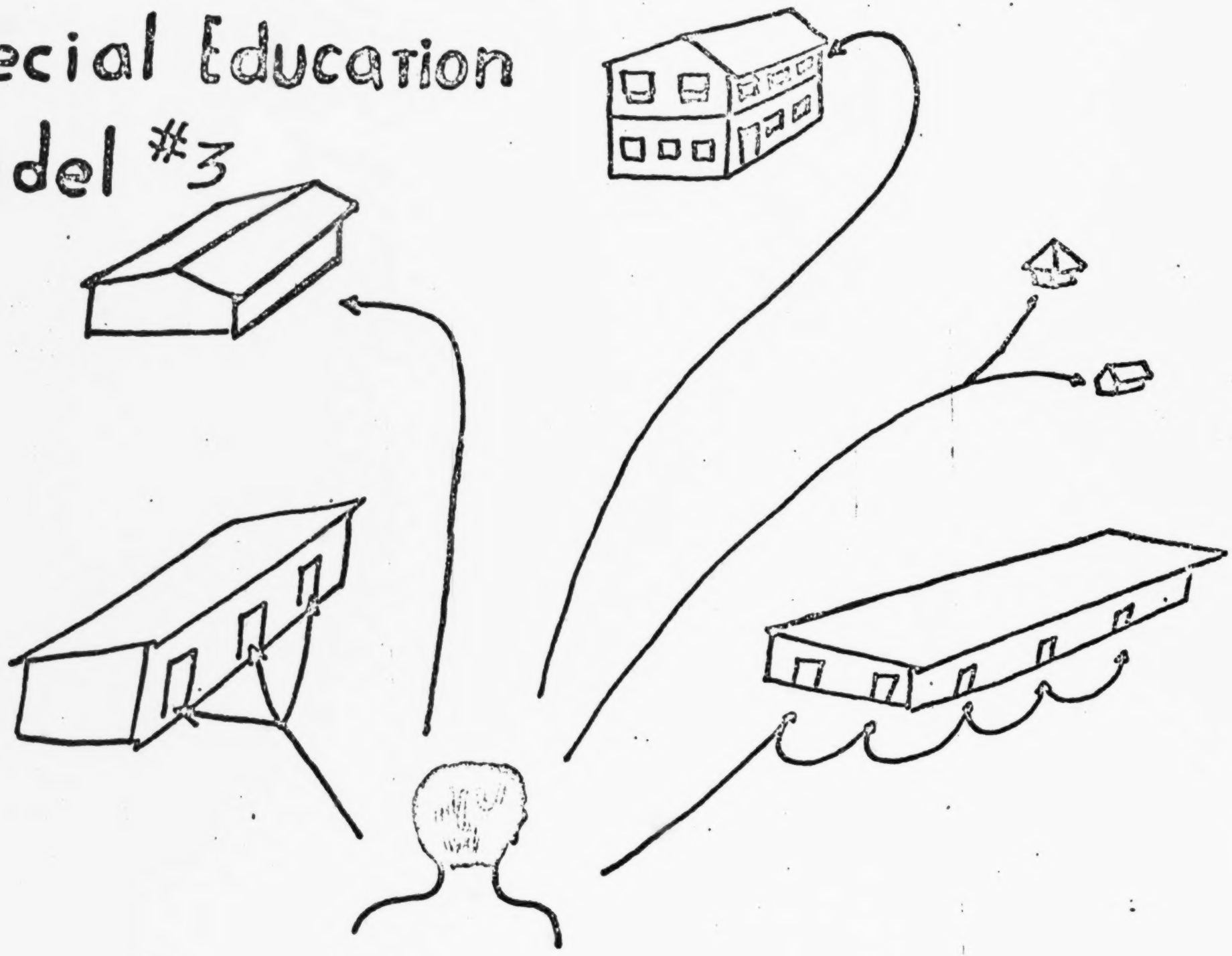
Model #2



SPECIAL EDUCATION
RESOURCE ROOM

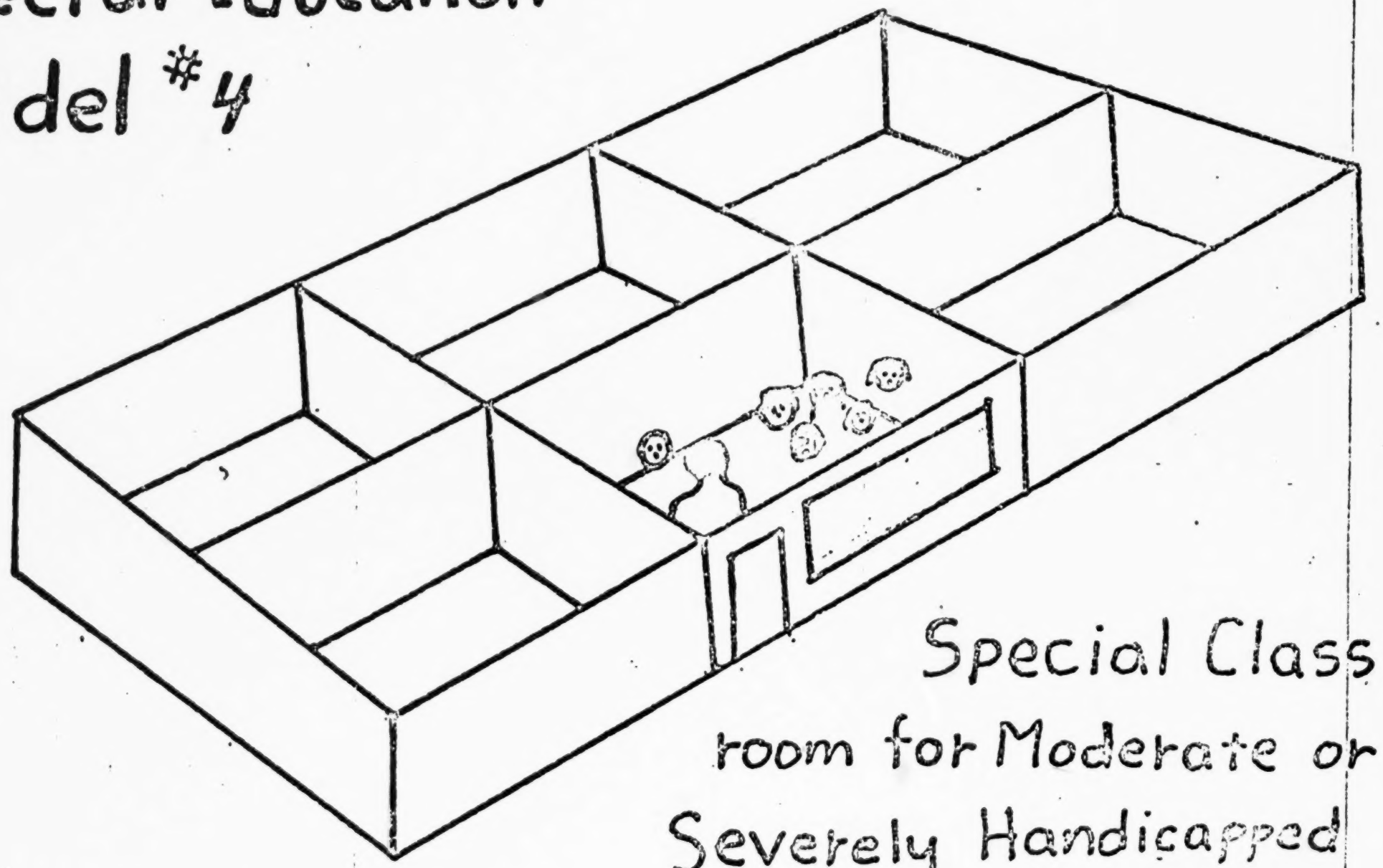
MODERATELY HANDICAPPED CHILDREN ARE ASSIGNED TO A RESOURCE ROOM WITH NONHANDICAPPED & A SPECIAL TEACHER

Special Education Model #3



ITINERANT TEACHER TUTORS HANDICAPPED CHILDREN IN SCHOOLS, HOME AND HOSPITAL

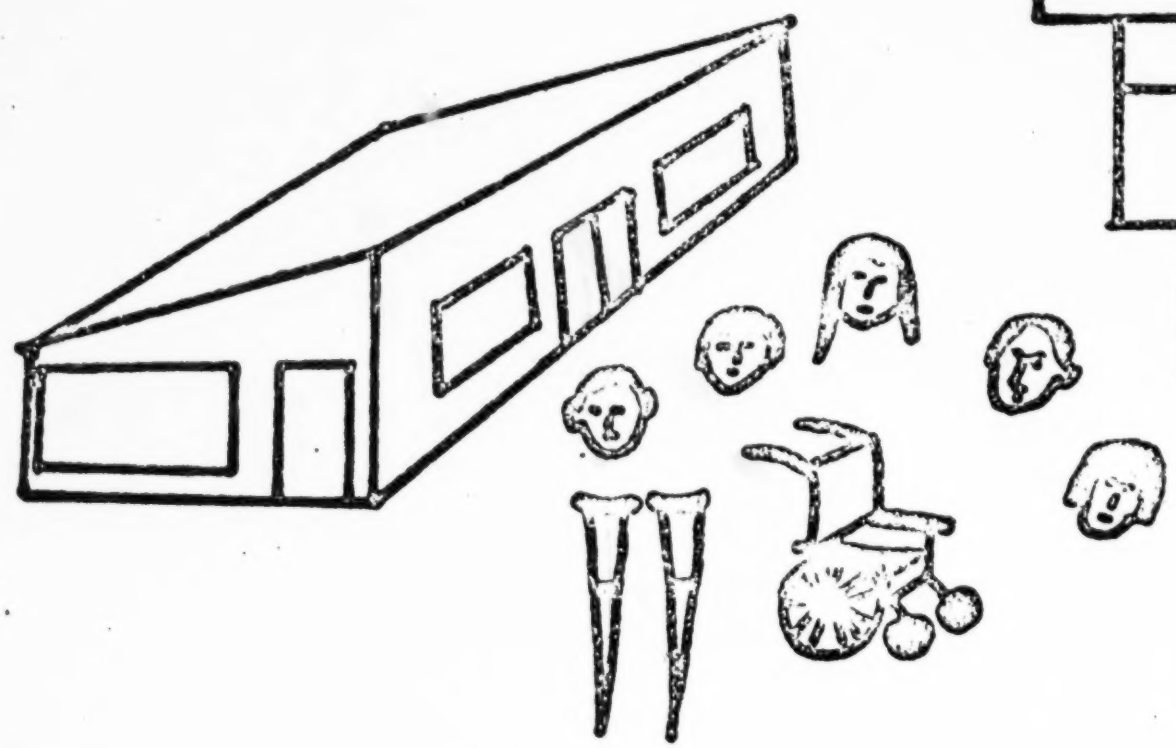
Special Education Model #4



Special Classroom for Moderate or Severely Handicapped

Special Education Model * 5

VISUAL NO. _____
SUBJECT _____



RESIDENTIAL SCHOOL FOR SEVERELY HANDICAPPED -
TEACHERS - ATTENDANTS - THERAPISTS - HOUSE PARENTS
DEAF - BLIND - MULTIPLE HANDICAPS